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Howard Hughes Center 6701 Center Drive West, Suite 1050 Los Angeles, California 90045

FAX TRANSMISSION TO USPTO

TO: Commissioner for Patents

Attn: Examiner Nicholas Augustine

Patent Examining Corps

Facsimile Center

Alexandria, VA 22313-1450

FROM:

Jason S. Feldmar

OUR REF .:

G&C 30566.335-US-01

TELEPHONE: (310) 642-4141

Total pages, including cover letter: 5

PTO FAX NUMBER: <u>571-273-8300</u>

If you do NOT receive all of the pages, please telephone us at (310) 641-8797, or fax us at (310) 641-8798.

Title of Document Transmitted:	REQUEST FOR CONTINUED EXAMINATION (RCE) (2)
Applicant:	Christopher Vienneau et al.
Serial No.:	10/619,758
Filed:	July 15, 2003
Group Art Unit:	2179
Title:	PROCESSING IMAGE DATA
Our Ref. No.:	G&C 30566.335-US-01

Please charge all fees to Deposit Account No. 50-0494 of Gares & Cooper LLP

Mame: Jason S. Feldmar

Reg. No.: 39,187

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Signature

JUN 2008 Date

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

JUL 3 0 2008

Applicant:

Christopher Vienneau et al.

Examiner:

Nicholas Augustine

Serial No.:

10/619,758

Group Art Unit:

2179

Filed:

July 15, 2003

Docket:

G&C 30566.335-US-01

Title:

PROCESSING IMAGE DATA

CERTIFICATE OF MAILING OR TRANSMISSION UNDER 37 CFR 1.8

I hereby certify that this correspondence is being filed via facsimile transmission to the U.S. Patent and Trademark Office

on July 30, 2008.

REQUEST FOR CONTINUED EXAMINATION (RCE) UNDER 37 C.F.R. §1.114

MAIL STOP RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

This is a Request for Continued Examination (RCE) under 37 CFR § 1.114 of patent application Serial No. 10/619,758, filed on July 15, 2003, and entitled PROCESSING IMAGE DATA, in which no payment of the issue fee, abandonment of, or termination of proceedings has occurred.

- \boxtimes Enter the unentered amendment previously filed on June 30, 2008 under 37 C.F.R. § 1.116 in the present patent application.
- \boxtimes The fee has been calculated as shown below in the "Claims as Filed" table.

CLAIMS PRESENT

					_
Claims Remaining:	Highest Number Previously Paid For:	Number Extra		Rate	Fee
Basic Filing Fee (Basic national fee + Examination fee + Search fee)					\$810.00
Total Claims					
32	32	0	х	\$50.00	\$0.00
Independent Claims					
4	4	0	X	\$210.00	\$0.00
MULTIPLE DEPENDENT CLA	IM FEE				\$0.00
TOTAL FILING FEE					\$810,00

- \boxtimes A charge to the Deposit Account identified below in the amount of \$810.00 to cover the RCE Filing Fees.
- \boxtimes Address all future communications to the Attention of Jason S. Feldmar at Gates & Cooper LLP, Howard Hughes Center, 6701 Center Drive West, Suite 1050, Los Angeles, California 90045, Telephone: (310) 641-8797.

7/30/2008 HMARZI1 00000049 500494 FC:1801

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810.00 DA

(PTO TRANSMITTAL - FILING UNDER 37 CFR §1.114)

Please consider this a PETITION FOR EXTENSION OF TIME for a sufficient number of months to enter these papers, if appropriate.

Please charge all fees to Deposit Account No. 50-0494 of Gates & Cooper LLP. A duplicate of this paper is enclosed.

Customer Number 55895

GATES & COOPER LLP

Howard Hughes Center 6701 Center Drive West, Suite 1050 Los Angeles, CA 90045 (310) 641-8797 By:

Name: Jason S. Feldmar

T-149

P.003/005 F-947

Reg, 200.: 39,187

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RECEIVED CENTRAL FAX CENTER

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

JUL 3 0 2008

Applicant:

Christopher Vienneau et al.

Examiner:

Nicholas Augustine

Serial No.:

10/619,758

Group Art Unit:

2179

Filed:

July 15, 2003

Docket:

G&C 30566.335-US-01

Title:

PROCESSING IMAGE DATA

CERTIFICATE OF MAILING OR TRANSMISSION UNDER 37 CFR 1.8

I hereby certify that this correspondence is being filed via facsimile transmission to the U.S. Patent and Trademark Office

on July 30, 2008.

Name: Kathleen Krochko

REQUEST FOR CONTINUED EXAMINATION (RCE) UNDER 37 C.F.R. §1.114

MAIL STOP RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

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Claims Remaining:	Highest Number Previously Paid For:	Number Extra		Rate		Fee
Basic Filing Fee (Basic national fee + Examination fee + Search fee)						\$810.00
Total Claims						
32	32	0	x	\$50.00	=	\$0.00
Independent Claims			<u> </u>			
4 .	4	0	X	\$210.00		\$0.00
MULTIPLE DEPENDENT CLA	IM FEE					\$0.00
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